PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)						Docke	Docket Number (Optional)		
FY 2007 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)						821-5	821-55		
Application Number 10/767,598						Filed	Filed January 29, 2004		
For A REPAIR METHOD									
Art Unit 1732						Exam	Examiner Daniels, Matthew J.		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.									
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):									
					<u>Fee</u>	<u>Sm</u>	all Entity Fee		
		One	month (37 CFR 1.17(a)(1)))	\$120		\$60	\$	
	X	Two	months (37 CFR 1.17(a)(2	2))	\$450		\$225	\$ <u>900.00*</u>	
		Thre	e months (37 CFR 1.17(a))(3))	\$1020		\$510	\$	
		Four	months (37 CFR 1.17(a)(4))	\$1590		\$795	\$	
		Five	months (37 CFR 1.17(a)(5	5))	\$2160		\$1080	\$	
Api							e mo. EoT paid 12-8-06; 3 mo. fee of		
1020.00 minus one mo. fee of 120.00 =\$900.00) X A check in the amount of the fee is enclosed.									
Payment by credit card. Form PTO-2038 is attached.									
The Director has already been authorized to charge fees in this application to a Deposit Account.									
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1121 . I have enclosed a duplicate copy of this sheet.									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
I am the applicant/inventor.									
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).									
attorney or agent of record. Registration Number 42,796									
attorney or agent under 37 OFR 1.34. Registration number if acting under 37 CFR 1.34									
Ales To						February 6, 2007			
Signature						_	Date		
Leo G. Lenna							(516) 228-8484		
Typed or printed name							Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
V	otal	of _	2	forms are su	bmitted.	1			
CERTIFICATION UNDER 37 C.F.R. §1.8(a) I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service as first class mail, postpaid in an evnelope, addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1458, Alexandria, VA 22313-1450.									
Dated: February 6, 2007 Leo G. Lenna									
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02/09/2007